Foster Family Home - Corrective Action Report Provider ID: 1-090102 Home Name: Janet Funtila, CNA Review ID: 1-090102-6 94-618 Hiahia Place Reviewer. 2/22/2017 Waipahu HI 96797 Begin Date: 2/8/2017 End Date: **Foster Family Home Required Certificate** [17-1454-6] 6.(d)(1) Comply with all applicable requirements in this chapter; and Comment: 6 (d)(1) Home visit made on 2/8/2017 for a 2-bed recertification. Corrective action report issued during home visit with corrective action plan due to CTA on 3/8/2017. 6 (d)(1) see applicable sections of this review. Foster Family Home Personnel and Staffing [17-1454-41] Have a current tuberculosis clearance that meets department of health guidelines; and 41.(b)(7) Have documentation of current training in blood borne pathogen and infection control, cardiopulmonary 41.(b)(8) resuscitation, and basic first aid. Tuberculosis clearances that meet department of health guidelines; and 41.(f)(1) Comment: 41.(b)(7) Current TB clearance not present in the home for CG#2. 41.(f)(1) Current TB clearance not present in the home for HHM#1. 41.(b)(8) Lapsed on CPR due on/before 1/14/2016 - was done on 1/19/2016. Lapsed on Blood Borne Pathogen (BBP) due on 9/26/2016 - was done on 10/1/2016 both for CG#1. Foster Family Home Records , 52.(c)(5) Medication schedule checklist: Daily documentation of the provision of services through personal care or skilled nursing daily check list, RN and 52.(c)(6) social worker monitoring flow sheets, client observation sheets, and significant events that may impact the life, health, safety, or welfare of, or the provision of services to the client, including but not limited to adverse events; Comment: 52.(c)(5) Doctor's orders, Pharmacy RX label, and Medication Administrative Record (MAR) did not match for client #1. 52.(c)(6) Current monthly nursing assessment not present in the home for Client #1.

Compliance Manager

Primary Care Giver

Date

Date

Feb. 22, 2017

WRITTEN PLAN OF CORRECTION

41.5(1) CG # 2 Completed the TB Clearance on Feb. 18, 2017.
41.5(1) Httm # 1 Completed the TB Clearance on Feb. 18, 2017.

The plan to prevent this happening again is nealing that they TB Skin test every year 1 Therefore, the home with use of Colendon to record before due dates for TB Skin Test every year.

41.6 (8) CG HI will not lapsed CPR & Bloodborne Pathogens the home will we a collendar to rewind before due date.

52. c (5) Chent # 1 Doctors order and phormany label and MAR match.

52. = (4) Correct Monthly Nursing Assessment completed on Dec. 17, 2014

and Jan- 13, 20171

The will not happen again for client #1 in the future. The home with check every worth and remind to the RN to send the copy to the home.

F.b. 22, 2017

JANET A, FUNTILA Francher Signature

94-618 Hishia Pl. Waipolu, Hr. 96797 ADD 2555